PART B - FEE(S) TRANSMITTAL Complete and send this form together applicable fee(s), to: Mail Mail Stop ISS Commissioner for Patents P.O. Box 1450 JAN 0 5 2005 Alexandria, Virginia 22313-1450 (703) 746-4000 or <u>Fax</u> INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed wh appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless corrected below or december when the property of th maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission. 26111 7590 10/05/2004 STERNE, KESSLER, GOLDSTEIN & FOX PLLC Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (703) 746-4000, on the date indicated below. 1100 NEW YORK AVENUE, N.W. WASHINGTON, DC 20005 00000198 09841187 01/06/2005 HLE444 01 FC:1501 02 FC:1504 03 FC:8001 1400.00 OP 300.00 OP (Signat 3.00 OP (D APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/841,187 04/25/2001 Michael L. Nelson 1857.0350000 TITLE OF INVENTION: METHOD AND SYSTEM FOR IMPROVING FOCUS ACCURACY IN A LITHOGRAPHY SYSTEM APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$300 01/05/2005 1000 a COC 1,700.00 **EXAMINER** ART'UNIT CLASS-SUBCLASS MATHEWS, ALAN A 2851 355-055000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Sterne, Kessler, (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Goldstein & Fox P.L.L.C. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Veldhoven, The Netherlands ASML Holding N.V. Individual Corporation or other private group entity Governm Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Mssue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 19-0036 (enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Michelle K. Holoubek

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Registration No. 54,179

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork rsons are required to respond to a collection of information unless it displays a valid OMB control number Effective and Appropriation Complete if Known propriations Act, 2005 (H.R. 4818). Application Number 09/841,187 TRANSMIT Filing Date Apr<u>il 25, 2001</u> For FY 2005 First Named Inventor Michael L. Nelson **Examiner Name** Alan A. Mathews Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2851 TOTAL AMOUNT OF PAYMENT (\$) 1,703.00 Attorney Docket No. 1857.0350000 METHOD OF PAYMENT (check all that apply) Check X Credit Card | Money Order None Other (please identify): X | Deposit Account | Deposit Account Number: 19-0036 Deposit Account Name: Sterne, Kessler, Goldstein & Fox P.L.L.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) X Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES EXAMINATION FEES SEARCH FEES Small Entity Small Entity Small Entity Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 150 Utility 300 500 250 200 100 Design 200 100 100 130 50 65 Plant 200 100 300 160 80 150 Reissue 300 500 150 250 600 300 200 100 Provisional 0 0 0 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee Description Fee (\$) Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 360 180 **Total Claims Multiple Dependent Claims Extra Claims** Fee Paid (\$) - 20 or HP Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20 Extra Claims Indep. Claims Fee (\$) Fee Paid (\$) - 3 or HP HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Extra Sheets Number of each additional 50 or fraction thereof **Total Sheets** Fee (\$) Fee Paid (\$) - 100 = _ (round up to a whole number) x / 50 = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other: Issue Fee - \$1,400.00; Publication Fee - \$300.00; Copy of Patent Fee - \$3.00 \$1,703.00

| SUBMITTED BY | | | | |
|-------------------|----------------------|--------------------------------------|--------|--------------------------|
| Signature | Witell F. Holoakel | Registration No. (Attorney/Agent) | 54,179 | Telephone (202) 371-2600 |
| Name (Print/Type) | Michelle K. Holoubek | | | Date 1/5/05 |

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